

# BRAC

## Bridge Funding Questionnaire

*March 15, 2003*

Please send copies of the latest inventory and inspection reports, load ratings, accident data, any other pertinent information, and electronic photos (640 x 480 pixels minimum .jpg) with this questionnaire by the due date specified in the cover letter.

<b>Agency Name:</b>	<b><i>Pick one of the following:</i></b> <input type="radio"/> <b>Replacement Candidate</b> <input type="radio"/> <b>Rehabilitation Candidate</b> <input type="radio"/> <b>Major Maintenance</b> ( <i>pick one</i> ) <div style="display: flex; justify-content: space-between; font-size: small;"> <div> <input type="checkbox"/> Scour Mitigation  <input type="checkbox"/> Seismic Retrofit  <input type="checkbox"/> Deck Repair         </div> <div> <input type="checkbox"/> Electrical Mechanical  <input type="checkbox"/> Bridge Strengthening  <input type="checkbox"/> Painting         </div> </div>
<b>Bridge Name:</b>	
<b>Bridge Number:</b>	
<b>Contact Person:</b>	
<b>Phone: (     )     -     </b>	
<b>Sufficiency Rating:</b>	
<b>Structure ID:</b>	

**Does your Agency want this bridge to be presented this BRAC meeting?**

☐ Y   ☐ N

If N, what year would you like it presented? \_\_\_\_\_

**Does this bridge site fall under a Sensitive Area Ordinance?**

☐ Y   ☐ N

**What would be the consequences of permanently closing this bridge?**

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### Total Project Description:

*Note: If this is a Rehabilitation Candidate give the estimated cost to replace the structure as well as the total cost to rehabilitate the structure.*

**Will you be requesting a deviation for functionality (FO)?**

☐ Y   ☐ N

**Brief Project Description:**

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### Replacement Bridge Types:

<b>New Superstructure Type</b>	
<b>New Substructure Type</b>	
<b>Proposed Length</b>	
<b>Proposed Curb to Curb</b>	

### Rehabilitation/Replacement Projects:

<b>PE Costs:</b>	<b>RW Costs:</b>	<b>CN Costs:</b>	<b>Approach Costs</b>
<b>All Other Costs:</b>	<b>Total Costs:</b>	<b>If a Rehab. What is the Replacement Cost?</b>	

### Other Projects:

\* For painting projects a Paint Inspection DOT Form 234-028 EF must be filled out.

<b>Category:</b>	<b>Category:</b>	<b>Category:</b>

### Realistic Start Dates (Month, Year):

<b>Preliminary Engineering</b>	<b>Right of Way Purchases</b>	<b>Construction</b>

# BRIDGE REHABILITATION/REPLACEMENT WORKSHEET

Proposed

Length: \_\_\_\_\_ x Width (Curb to Curb) \_\_\_\_\_ = \_\_\_\_\_ SF

## Preliminary Engineering:

Preliminary Engineering (15%) \_\_\_\_\_

Environmental Permit Requirements \_\_\_\_\_

Describe: \_\_\_\_\_  
\_\_\_\_\_

**Total PE Costs =>** \_\_\_\_\_

## Right of Way:

Relocation \_\_\_\_\_

Acquisition \_\_\_\_\_

**Total RW Costs =>** \_\_\_\_\_

## Construction:

Superstructure (1) \_\_\_\_\_

Substructure (2) \_\_\_\_\_

**Total CN Costs =>** \_\_\_\_\_

## Approach Costs (Maximum 15%)

Approach Cost [(Sum ((1) through (5)) x 15%] \_\_\_\_\_

## All Other Costs:

Detour: Bridge (3) \_\_\_\_\_

Other(4) \_\_\_\_\_

Construction Engineering (10%) \_\_\_\_\_

Contingency (15%) \_\_\_\_\_

Mobilization (10%) (5) \_\_\_\_\_

Inflation Factor ( 10% ) \_\_\_\_\_

Other (Describe, such as higher % or unique eligible work): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total Other Costs =>** \_\_\_\_\_

## Total Rehabilitation or Replacement Project Costs:

### If a Rehabilitation, what is the Replacement Cost?

Estimated Bridge Replacement Cost Total \* \_\_\_\_\_

\* Cost per Sq Ft is \_\_\_\_\_ If this cost exceeds \$350/sqft, explain why

\_\_\_\_\_  
\_\_\_\_\_